



# NAMI Westside LA Newsletter

[www.namila.org](http://www.namila.org)

824 Moraga Drive, Los Angeles, CA, 90049, (310) 889-7200

July 2009

## Over 700 Attend NAMI's Pathways to Wellness Conference



On May 17, 2009, over 700 Angelenos attended NAMI's Pathways to Wellness, the Second Annual Jewish Community Conference on Mental Health, at Sinai Temple.



The event, jointly sponsored by Sinai Temple, NAMI Westside LA, NAMI-Los Angeles County, the Jewish Family Service of Los Angeles, and the CAPP Foundation, offered workshops on areas of mental health as diverse as anger management, stress reduction, the use of nutritional supplements, borderline personality disorder, and communicating during difficult times.



After a welcome from Rabbi Brian Schuldenfrei, NAMI Westside LA President Sharon Dunas spoke to an attentive crowd about how mental illnesses are no-fault illnesses, and yet there is a huge stigma attached to them. The Pathways to Wellness Conference was designed to help eradicate that stigma.



Melody Beattie, author of *Codependent No More*, was the keynote speaker, and also spoke on the "language of letting go". Other presenters included Dr. Lynn M. McFarr (Borderline Personality Disorder and DBT); Dr. Michael Levittan

(Anger Management); Dr. Hyla Cass (Nutritional Supplements to Enhance Mental Health); Dr. Alexander Young (Weight Gain and Related Side-Effects of Antipsychotic Medications); Dr. Randye Semple (Mindfulness-based Stress Reduction), and Andy Behrman (How Family and Friends can Speed the Recovery Process).

Each workshop was packed with avid listeners. Participants also benefited from a Resource Room where literature and videos were available.



NAMI Westside LA wishes to thank Eddie Silberman, Conference Coordinator, for making this year's conference such a great success.



For more information about the conference, read *Message from our President, Sharon Dunas, MFT*, on Page 3 of this newsletter.

# Support Groups and Speaker Presentations

All events (except where noted) are held on the first floor of the Ed Edelman Westside Mental Health Center, 11080 W. Olympic Blvd., at the SE Corner of Olympic & Sepulveda in West LA.

Secure parking is available in the garage in the evenings only; use the Olympic entrance. Call (310) 889-7200 for information. For more on support groups, refer to Important Contact and Resource Information in this newsletter.

The **Family Share & Care Support Group** meets every month on the first and third Wednesdays from 8:00-9:30 PM, on the second and fourth Wednesdays from 6:30-8:30 PM, and on the second Monday from 1:00-3:00 PM.

A Family Support Group is also held on the first Tuesday of every month from 7:00 PM to 9:00 PM at Step Up on Second, 1328 Second Street in Santa Monica, (310) 394-6889.

The **NAMI Connections Support Group for Consumers** meets every month on the first and third Wednesdays from 8:00-9:30 PM and on the second and fourth Wednesdays from 6:30-8:30 PM. Contact Janet at (310) 990-1338 for more information.

**Speaker Presentations** are held every month on the first and third Wednesdays from 7:00-8:00 PM.

## Wednesday, July 1, 2009

No speaker on this date.

## Wednesday, July 15, 2009

"The Many Paths to Recovery from a Brain Illness"

Discussion among four people who have recovered: Sanjeet Shihota, Avi Robnoy, Matthew Lord, and Janet Steinberg.

## Wednesday, August 5, 2009

"Journey Through Bipolar Disorder"

Terri Cheney, attorney, support group facilitator, and author of *Manic, A Memoir*, will discuss her book and her journey through bipolar disorder.

## Wednesday, August 19, 2009\*\*

Special screening of "The Chorus," a compelling film that presents a true portrait of the mentally ill, their living conditions, relationships, and needs in downtown Los Angeles.

**\*\*Held at 12210 1/2 Nebraska, corner of Nebraska and Bundy, in West Los Angeles. Support group will follow the screening of the film.**



Next time you search the Internet, you can raise money for NAMI Westside LA! Make [www.goodsearch.com](http://www.goodsearch.com) your search engine of choice. The first time you sign on, choose NAMI LA as your charity. Then, each time you search for anything online using GoodSearch, NAMI Westside LA will make a little money! GoodSearch is powered by Yahoo, so you know the search will yield the results you're looking for. And it's a painless, easy way to help NAMI Westside LA raise funds for all our programs. Thanks for using [www.goodsearch.com](http://www.goodsearch.com).

## Need a Computer Expert?

Are you having problems with your computer? Call Dan Zivetz at (424) 208-3828 or email him at [danzivetz@ca.rr.com](mailto:danzivetz@ca.rr.com). You can also visit his website at [www.pcjourneyworks.com](http://www.pcjourneyworks.com). Dan has been keeping the computers at the NAMI Westside LA office in working order for several years. There is no computer problem Dan cannot solve!

### Contents

Over 700 Attend Pathways to Wellness Conference.....	Page 1
Support Groups and Speakers.....	Page 2
Need a Computer Expert?.....	Page 2
Are You Still a NAMI Member?.....	Page 2
President's Message.....	Page 3
NAMI Westside LA Graduates Two Family-to-Family Classes	Page 4
Sierra Tucson Honors Sharon Dunas.....	Page 5
NAMI Westside LA's Upcoming September Classes.....	Page 5
NAMI Westside LA Thanks Its Recent Donors.....	Page 5
Recent NAMI Westside LA Speakers.....	Page 6
The Mentally Ill in the Correctional System.....	Page 6
Plan to Attend NAMI California's Annual Conference.....	Page 7
Register Again at Ralphs to Bring Donations to NAMI.....	Page 7
UCLA Program for Persons with BPD.....	Page 8
Westside Families Anonymous.....	Page 8
Advocacy Spotlight: New Guide on Crisis Intervention.....	Page 8
NAMI Westside LA is Looking for New Office Space.....	Page 8
The Research Corner.....	Page 9
Gearing Up for Los Angeles NAMIWalk.....	Page 11
Things to Remember.....	Page 12
Membership Volunteer Needed.....	Page 12
Contact and Resource Information.....	Page 12

## Are You Still a NAMI Member?

If you have not yet renewed your membership, please fill out and send in the Application for Membership form at the back of this newsletter. As mentioned on the form, send it to NAMI Westside LA, Membership, P.O. Box 491216, Los Angeles, CA, 90049.

We are in the process of deleting those with lapsed memberships from our membership rolls, so remember that unless you renew your membership, you will no longer be able to receive this newsletter and other valuable information.

The number of NAMI Westside LA members we have determines the amount of other funds we receive to allow us to continue offering free classes to families and consumers.



## An Amazing Day of Learning and Fighting Stigma

Following NAMI Westside LA's Second Annual Jewish Community Conference on Mental Health, Pathways to Wellness, held at Sinai Temple on

Sunday, May 17, many attendees commented that this Conference was the best thing since sliced bread with butter and sugar on it. One participant remarked that this Conference was better than conferences she paid \$400 to attend; she could not get over the fact that everything was free, including the parking! Psychotherapists even received free CEUs for the event. The Conference served up incredible speakers and spinach quiche to make sure the 700+ attendees were intellectually stimulated and well fed.

NAMI Westside LA thanks Rabbi Wolpe and the congregants of Sinai Temple, who shared their beautiful Ruth and Alan Ziegler Hall with us. Rabbi Wolpe is very sensitive to the impact of mental illness on those with the diagnosis and the effect on those who love them. NAMI Westside LA also thanks the Los Angeles County Coordinating Council of NAMI Presidents, the Jewish Family Service, Ruth Zeigler, Martin and Esther Capp, Frances Tibbits, and Roberta and Joe Howard for making this Conference possible. And finally, without Eddie Silberman, there would be no Mental Health Conference at all. Many thanks to Eddie for fighting stigma in this manner and offering the community this rewarding experience.

The purpose of the Conference is to fight stigma and raise public awareness that mental illnesses are treatable illnesses. Stigma is defined by Webster's Dictionary as a "mark of disgrace or dishonor". Stigma in mental illness is the banishment or scapegoating of people with mental illness whose condition seems so repugnant that they are judged to deserve their fate. When we see the 90,000 homeless people in Los Angeles, we find their condition so frightening that we avoid eye contact with them altogether. Because they have nowhere else to go, the mentally ill use our public libraries as day treatment programs and often end up in jail when they refuse treatment. NAMI Westside LA offers this Conference for free to fight

this kind of stigma and to let the public know that recovery is possible in spite of a diagnosis.

Melody Beattie, who has written several books, was the keynote speaker. Her most recent book, *The New Codependency*, talks about a new generation of codependents who feel entitled to taking and expecting, with little or no giving or guilt. We folks who have mentally ill relatives have all gone to bed thinking about what else we can do to manage the life of someone with mental illness who refuses treatment and does not recognize that they need treatment. Fuller Torrey, in his books *Surviving Schizophrenia* and *Surviving Manic Depression*, states that 50% of all people with a mental illness do not realize that they are ill. This makes it doubly hard for families to stop giving and set limits with their ill relatives.

Melody Beattie's message to us all was simple - "stay in the moment" - even though you have a diagnosis or your relative refuses treatment. Do not assume bad events will happen in the future and do not ruminate on the so-called perceived mistakes you made in the past. Melody advised to come from your heart and ask "What can I do to help the situation?" After we have done what our heart encourages us to do, Melody then encouraged us to "let go" of the problems our relative is struggling with. Give yourself a pat on the back to acknowledge that you have done what your heart told you to do and then let go and go on with your day and your original plans for yourself. You matter too - and all of your caretaking may not change the trajectory of your relative's illness. It is the same with cancer or AIDS. We can love, support, cajole, encourage, and surround our relative with meaningful connections to our family or to others and still we may not control the outcome of his/her illness.

Melody encourages us to give up the "victim" role. She encourages us to set limits based on what your heart tells you. Setting limits is saying to your ill relative, "I will do this for you, but I will not do that." Partner with them; say "I will take you to the deli for dinner if you see your psychiatrist or case worker this week." She encourages us to make a family tree of five generations on each side and

list the personality traits and roles our relatives lived out in their lives. We should also write our own legacy in spite of having a mentally ill relative. You can change the legacy of "I am suffering at the hands of my ill relative" to "life has brought me something that makes me grow and I am learning from this experience." "It's OK to nurture, comfort, and take care of myself." Melody also recommends that we all forgive ourselves and forgive our relatives for being ill.

Melody also talked about everyone in the audience being a member of the "grief club". She mentioned the chronic grief that those of us with a mentally ill relative often feel. She suggested we just let ourselves join these clubs and stop resisting "what is". "What is" is not going to change - the only thing that may change is our relationship to it. We need to accept "what is", follow our hearts about relating to "what is", and then go on and have our own lives anyway.

Being codependent is a normal behavior. We lose ourselves in taking care of another and this is a normal state of affairs. Melody mentioned the Elizabeth Kubler-Ross five stages of dying, which are denial, bargaining, rage, grief, and acceptance. She suggested we add two more stages, which are obsession and guilt. It is normal to become obsessed when someone gets ill and it is normal to feel guilt about it. How could someone get ill on my watch? Why couldn't I have prevented this? Was I too harsh, too soft, too unavailable, or too engulfing? These are questions we all ask when a relative of ours develops a mental illness.

Melody said that recovery from codependency is about learning to trust ourselves and our connection to the God of our understanding. "It's not that we get the good and the bad; we get what we get in this life." Open yourself to each new experience, whatever it is.

Codependency is caretaking, controlling, and over-engagement. We have to look at our own behaviors and assess the behavior that is causing pain. And then when we know what is causing the most pain for ourselves, we can do something about it. Melody went on to say a lot of

us have missed our emotions. When you feel pain, let yourself feel it because when you suppress your feelings, this could lead to more depression. Are you feeling your feelings in spite of your medications, in spite of your obsessive work, in spite of your escaping with gambling or watching TV? Allow yourself your feelings and the answers will come to you as to what to do with your relative with a brain illness. Invite in the anxiety, depression, or rage, and began to have an internal dialogue with these parts of yourself.

The Conference also featured other wonderful speakers. Dr. Michael Levittan from West Los Angeles led a discussion on anger management. He helped the audience find the roots of anger and aggression and gave the audience practical tools for managing their anger. His focus was on how to manage excessive anger to have good relationships, effective parenting, and family harmony. Specific techniques and insights were given for dealing with those "heat of the moment" feelings as well as long-term resentments.

Dr. Hyla Cass from Santa Monica, author of *Eight Weeks to Vibrant Health* and *Supplement Your Prescription: What Your Doctor Doesn't Know About Nutrition*, spoke on natural alternative medications for brain illnesses and how these natural substances can be used for brain illnesses alone or in conjunction

with psychopharmacological medications for more serious mental illnesses.

Dr. Alex Young and Dr. Amy Cohen from UCLA spoke on weight gain with anti-psychotic medications and how to combat it. You can contact either of them at UCLA to become part of their program to lose weight caused by anti-psychotic medications.

I spoke on communicating during difficult times, giving the audience six tools to use and role-playing Dr. Xavier Amador's four tools for communication with those who lack insight into the fact that they are ill. Dr. Amador's four tools are to listen, empathize, agree with, and then partner with mentally ill loved ones to encourage effective treatment. This kind of reflective, agreeable, empathic listening is very often more effective in coaxing your relative into treatment than reminding them of their diagnostic label and telling them to take their medications. In Dr. Xavier Amador's book, *I'm Not Sick, I Don't Need Help*, he describes these four tools of communication well. The audience left with new tools for communicating and making space for the illness to be part of the family system.

Andy Behrman, author of *Electroboy*, spoke on how families can help with recovery for someone with a mental illness. His book describes his own personal odyssey through bipolar highs and lows. He described very movingly

how families can help speed recovery and explained how his own family supported and helped him.

Dr. Lynn McFarr from UCLA's Geffen School of Medicine and Director of CBT California spoke on strategies for working with the difficult symptoms of Borderline Personality Disorder (BPD) and the use of Dialectical Behavior Therapy (DBT). BPD describes the dysfunctional behavior caused by an inability to regulate emotion. Originally developed by Dr. Marsha Linehan, DBT has evolved from standard cognitive-behavioral therapy, blending behavioral and crisis intervention and mindfulness techniques into a comprehensive therapeutic model. DBT can also be helpful with suicidal behavior, substance abuse, excessive anger, and intense interpersonal conflicts.

Psychiatrist Dr. Randy Semple from the Keck School of Medicine at USC led a discussion on mindfulness and how to survive healthfully in these stressful times. She had the audience practice being in the present (the here and now), letting go of negative past histories, and viewing the future optimistically. People felt at peace and relaxed after her session.

Thanks again to all the NAMI volunteers who made this day possible. I look forward to a repeat performance next year.

Are you receiving NAMI Westside LA's political action emails? If you are not receiving our emails about notifying your congressional representative and the governor of your views on mental health funding, please email Mindy at [mglazer@namila.org](mailto:mglazer@namila.org), and we'll put you on our mailing list.

## NAMI Westside LA Graduates Two Family-to-Family Classes



NAMI is proud to have graduated two Family-to-Family classes this spring. So many people signed up for our spring class that we had to create a second class.

Heartfelt thanks to our Family-to-Family teachers, Achee Stevenson, Marilyn Sano, Janet Volat, Monica Parks, and Judy Nahman-Stouffer.



## Sierra Tucson Honors NAMI Westside LA President Sharon Dunas



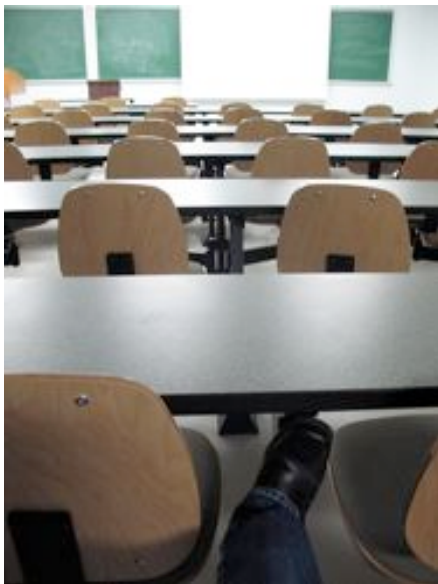
Sharon Dunas, President of NAMI Westside LA, was among the honorees at Sierra

Tucson's "Gratitude for Giving" Breakfast in Beverly Hills on June 17. Sierra Tucson held the event to recognize individuals in the Southern California community for their years of giving to others. Sharon was recognized with the Humility Recognition for her many years of service to the community through her work as NAMI Westside LA's president,

a support group facilitator, a Family-to-Family teacher, and a trainer of new Family-to-Family teachers, as well as for her work to speak out against stigma at any opportunity.

We congratulate Sharon for this well-deserved award!

## NAMI Westside LA's Upcoming September Classes



NAMI Westside LA plans to hold a new **Peer-to-Peer** recovery class in September. This class is for mental health consumers who are interested in learning to maintain their recovery, and live as well as they can with what they have.

We also plan to hold a **Family Connections** class for relatives of those with Borderline Personality Disorder (BPD), which will begin September 21. This free, 12-week psycho-educational class has been shown to reduce family members' guilt, depression, and the burden of dealing with the complex issues surrounding BPD. If you think you would benefit from this class, please contact the instructors at [info@bpdla.com](mailto:info@bpdla.com) to reserve a place.

In September, we also expect to hold another 12-week **Family-to-Family** class for relatives of those with brain illnesses. Designed to help parents, spouses, children, siblings, and other family members deal with the issues of mental illness in the family, this course will teach you about the major mental illnesses, their side-effects, medications, communication skills, advocacy within the health-care system, and self-care. Thousands of families have benefitted from this class, and many think it is *life-changing!*

Information on registering for the **Family-to-Family** and **Peer-to-Peer** classes will be on our website, [www.namila.org](http://www.namila.org), or you can email Eddie Silberman at [eddiesilberman@namila.org](mailto:eddiesilberman@namila.org), or contact him at (310) 889-7200, ext. 5.

## NAMI Westside LA Thanks Its Recent Donors



NAMI thanks its most recent donors for the support that makes our programs possible. NAMI receives no

financial contributions from the national organization; our donors are our entire financial support. The programs you read about in this newsletter, indeed, the newsletter itself, are all made possible by these generous donations.

Patricia J. Amaral  
Sue Antebi

Miranda Brocki  
Joaquina DelMiguel  
Jacqueline Edwards  
Janice Feinstein  
Eloise Geneblack  
Lori Hartz  
Charles and Margaret Healy  
Mary and Bob Herman  
Joe Hirscher  
Roberta Howard  
Rose Howlett  
Elizabeth W. Husten  
Alexia Johnson  
Shirley Kirby  
Julia Lewis  
Ann Lippincott  
Gail L. McInnes

Soraya Newell  
Lisa L. Rakusin  
Carole Rammas  
Barbara Rothstein  
Barbara Sands  
Gary Seidler  
Richard Stevenson  
Yasuyo Yoshikawa

We also want to thank Jessica James and the NAMI Club of Valencia High School for another donation and the Martin and Beatrix Padway Revocable Trust for its donation in honor of Bruce Padway.

## Recent NAMI Westside LA Speakers

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Our speaker series offers the most up-to-date research from highly esteemed clinicians in all areas of mental illness.

Unfortunately, these recaps only

offer you a synopsis of the information attendees learn, so please take note of upcoming speakers of interest, and join us, so you too can participate in the discussion.

### Treating OCD

Karron Maidment, RN, MFT, who works in the treatment of obsessive-compulsive disorder (OCD) at UCLA, spoke to our Family Support Group on the subject on April 1, 2009. We learned that OCD

affects 2-3% of the population, and is more common than bipolar disorder, schizophrenia, and panic disorder. In fact, OCD is the most common psychiatric condition after phobias, substance abuse, and major depression. Although OCD affects men and women almost equally, it may have an earlier onset in males, and depression is a common co-occurring disorder with OCD.

Obsessions are defined as intrusive, unwelcome thoughts, impulses, or images. They occur against the will, are repugnant, and cause anxiety or distress. Most of the time they are experienced as senseless or excessive, yet not all intrusive, repetitive thoughts are obsessions. Compulsions are repetitive, intentional behaviors that one feels compelled to perform, albeit reluctantly. Compulsions are done to alleviate the anxiety caused by the

obsessions. Compulsions can be physical or mental things you do to avoid something.

One of the treatment options is medication, which helps 50-60% of patients, and improves symptoms by 30-40%. Symptoms generally return within six months if medication is discontinued. Cognitive behavior therapy helps 60-90% of patients, and improves symptoms by 50-85%. With this type of therapy, consumers maintained improvement at an annual follow-up. Cognitive behavior therapy works by gradually exposing the consumer to the obsessive fear, followed by encouragement to resist the compulsions.

Potential causes of OCD are an imbalance in serotonin levels in the brain, aberrant brain physiology, genetic causes, and bacteria.

## The Mentally Ill in the Correctional System

By NAMI Member Linda Lagasse

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In 2005, approximately 50% of the people in jails and prisons were mentally ill (James & Glaze, 2006). The California Department of Corrections claims to be the largest mental health care provider in the state of California, and mental health treatment is a legal right for inmates. All federal and a majority of state prisons offer mental health screening, medication, and accessibility to therapy or counseling, with medication as the most frequent. However, a 2006 Bureau of Justice Statistics Report indicated that less than one third of inmates with psychiatric disorders received treatment. Suicide rates were at a record high in 2002 for mentally ill inmates, and a federal takeover of prisons occurred in 2005 because of poor medical conditions (Udesky, 2003; Torrey, 2008).

As we know, correctional facilities have taken the place of treatment facilities for mentally ill individuals because of deinstitutionalization. This process began in 1956, with most releases occurring from 1966-1984. The intention was to release patients to family and outpatient facilities, yet inadequate facilities were in place. Stigmatization of mental illness, the Lanterman-Petris-Short (LPS) Act, and limited housing

options also contributed to the problem. (The LPS Act is a law that restricts involuntary commitment unless a person is "imminently dangerous," limiting access to services.) A mentally ill person has the right to refuse treatment, and the cognitive impairment of mental illness may render a person incapable of seeing his/her illness. Self-medicating and co-occurring substance abuse disorders result in the use of street drugs, exacerbating symptoms, homelessness, and prison time.

Public education, increased treatment and housing programs, and increased corrections treatment and referral (and our mental health courts) offer solutions to this social dilemma.

Some prisons are implementing humane and therapeutic environments for mentally ill prisoners. Direct-supervision jails, residential treatment units, intermediate care programs, and co-occurring disorders treatment are programs implemented by correctional facilities. Separate facilities, a treatment-oriented structure, peer support, increased interaction between inmates and officers, and psychoeducation are some of the features of these programs. Discharge

programs for the mentally ill provide housing referrals, community service links, SSI, and medical services in addition to follow-up care. Study of these programs concluded that a supportive, structured, therapeutic environment is necessary to ensure new ways of thinking and development of life skills for those with dual disorders. In addition, these programs reduce recidivism, substance abuse, and mental health symptoms.

Increasing safe, accessible housing options for the mentally ill outside of correctional facilities helps those caught in the cycle of homelessness, petty crime, and incarceration. One model of housing available is "supportive public housing," which offers a room or apartment, freedom to come and go, and in-house support with connections to social services and mental health care. Supportive public housing saves the state money by cutting costs on emergency care, hospital stays, and residential mental health facilities. In addition, the mentally ill are off the streets, and have a home, services, and support to cope with their illness, making it possible for many to work, have loving friends and family, and live a fruitful and happy life.

## Plan to Attend NAMI California's Annual Conference in Torrance, August 21-22

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This year, NAMI California's annual conference is in Southern California at the Marriott South Bay in Torrance, California on August 21-22, 2009. This year's theme is "Destination: Recovery!" If you haven't been to a convention, these are great opportunities to learn more about mental illness. As is often said, a family that is both educated and

loving is crucial to the recovery of an ill relative. And if you are consumer, obviously the more you know, the better off you are. To sign up, go to [www.namicalifornia.org](http://www.namicalifornia.org) and click on the convention icon in the upper right-hand corner of the page. You will see a registration form.

## Register Again at Ralphs to Bring Donations to NAMI

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NAMI Westside LA has been participating in Ralphs Community Contribution for the past several months. We have several hundred members and supporters, so if you haven't yet linked your Ralphs Rewards Card to benefit NAMI Westside LA, please do so today. It only takes a few minutes, and once you've linked your card, Ralphs will make a donation to NAMI for every dollar you spend there.

To make sure your purchases benefit NAMI Westside LA, do the following:

If you have not registered:

1. Log in to [www.ralphs.com](http://www.ralphs.com).
2. Click on Sign In/Register.

3. Click on New Customer? and then on Sign up today!
4. Enter your zip code and click on find.
5. Click on Select next to the store at which you primarily shop.
6. Enter your email address and a password (please note the rules next to this field) twice.
7. Subscribe or unsubscribe to email subscription by leaving the check marks or removing them.
8. Click on Confirm.
9. Click on Agree to Terms and Conditions.
10. Click on Confirm.
11. Click on Edit Community Contribution Program Information.
12. Enter the card number as shown on your Ralphs Rewards Card.
13. Click on Save Changes.
14. Confirm or enter any corrections and click on Save Changes.
15. Enter "90369", which is NAMI Westside LA's five-digit NPO number and click on Search.

16. In the Select Your Organization section, click on the bubble next to NAMI Westside LA.
17. Click on Save Changes. Your organization selection will appear on the right side of the screen. You have now completed your Online rewards card registration AND your Community Contributions registration.
18. Click on Logout.

If you have registered:

1. Log in to [www.ralphs.com](http://www.ralphs.com).
2. Click on Sign In/Register.
3. Enter your email address and password.
4. Click on sign in.
5. Click on My Account (in the top right-hand corner of the screen).
6. View all your information and edit as necessary.
7. Click on Logout.

## Get Your Newsletter Via Email



Do you want to receive your *NAMI Westside LA Newsletter* via email? Then email us at [ssdunas@namila.org](mailto:ssdunas@namila.org). You will save us some postage and receive your newsletter early!

## Have a Story to Share?

Please send us your personal stories for publication in the *NAMI Westside LA Newsletter*. Your story might help others on the road to recovery. We also welcome book and speaker reviews. Items should be 250 words or less and may be edited. Email your ideas to Mindy Glazer at [mglazer@namila.org](mailto:mglazer@namila.org).

*"Grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference."*  
- Serenity Prayer

# UCLA Program for Persons with Borderline Personality Disorder Begins in July


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In July, Dr. Robin Kissell and James Rosser, LCSW, of the UCLA Borderline Personality Disorder Initiative are set to begin a new cycle of their mentalization-based treatment for Borderline Personality Disorder. In addition, they

are beginning a Dialectical Behavioral Treatment cycle in September. Interested consumers should call the clinic at (310) 825-7447 to ask for an intake interview. Space is limited.

**EARN UP TO 18 CE HOURS**



*CAMFT Fall Workshop Series*  
**THOUGHT LEADERS  
IN MENTAL HEALTH**

*Log on to  
www.camft.org  
for topics,  
speakers,  
and registration!*

CAMFT workshops lend a forum for psychotherapists to learn and share new ideas on topics. It's a place to agree, disagree, contemplate, and perhaps expand your knowledge or points of view—not online, but together with your colleagues in these information-rich workshops presented by individuals who have been chosen for their practicality, enthusiasm, and knowledge.

<i>Northern California</i> October 17-19, 2008 Oakland Marriott City Center	<i>Southern California</i> November 7-9, 2008 Marriott Los Angeles Airport
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CALIFORNIA ASSOCIATION OF MARRIAGE AND FAMILY THERAPISTS  
7901 RAYTHEON ROAD • SAN DIEGO, CA 92111 • (858) 292-2638

## Westside Families Anonymous

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Families Anonymous (FA) is about improving the lives of people who are struggling with a family member who has substance abuse and/or mental health issues. Often the problems concern dual diagnosis, drugs plus mental illness. Members take turns being the leader at the meetings, where the leaders discuss what they have learned from their experiences. There are helpful readings on topics like changing one's attitude, trying not to control everything, accepting what cannot be changed, trying not to be an enabler, and focusing more on one's own needs.

The Culver City/Palms Chapter meets every Tuesday night at 7:30 PM at 3751 Hughes Avenue, half a block north of Venice Boulevard, near Brotman Hospital. The First Lutheran Church is two doors to the north. The meetings of this chapter involve a small group of friendly people sitting around a conference table. Visitors are welcome. There is plenty of time for everyone to talk.

For further information, go to: [www.familiesanonymous.org](http://www.familiesanonymous.org).

## Advocacy Spotlight: NAMI Releases New Guide on Crisis Intervention Programs for Youth

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NAMI's new guide, *Supporting Schools and Communities in Breaking the Prison Pipeline: A Guide to Emerging and Promising Crisis Intervention Programs for Youth*, informs advocates about

existing crisis intervention programs for youth and what they can do to promote and implement such programs in their states and communities.

To download a copy of the guide, go to: <http://www.nami.org/Template.cfm?Section=CIT2&template=/ContentManagement/ContentDisplay.cfm&ContentID=75265>.

## NAMI Westside LA is Looking for New Office Space

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NAMI Westside LA is looking for new office space, so if you know of a place, centrally located on the Westside, with approximately 2,000 square feet of space, room for three computer stations,

and a separate room large enough for 30 people, in which we could hold one of our classes, contact Eddie Silberman at [eddieilberman@namila.org](mailto:eddieilberman@namila.org) or Sharon Dunas at [ssdunas@namila.org](mailto:ssdunas@namila.org). If you

know someone with excess office space they might be willing to donate to NAMI, please let us know. Thank you.

# The Research Corner



In a study in the *Journal of the American Academy of Child and Adolescent Psychiatry*, researchers

report that

## **Depakote ER**

**(technically, divalproex ER) had no treatment effect in a four-week, placebo-controlled clinical trial of the drug in treating pediatric bipolar disorder in kids and teens aged 10 to 17.** Depakote did not beat the placebo. Researchers included Karen Wagner of the University of Texas and Timothy Wilens of Harvard University. Both have been subjects of investigations over underreported monies they've received from pharmaceutical companies and possible violations of federal research rules.

\* \* \*

In the debate surrounding violent crimes referred to as "acts of madness", it is often assumed that the violence is a direct result of the perpetrator's mental illness. Previous research suggests that people with schizophrenia are at higher risk for violent behavior; however, there is uncertainty as to the magnitude of this risk, and if it can really be attributed to other factors.

A new study, presented in the May 20, 2009 issue of *Journal of the American Medical Association*, is the largest in this field to date. In it, researchers compared the rate of violent crime in over 8,000 people diagnosed with schizophrenia between 1973 and 2006, and a control group of 80,000 people from the general population of Sweden. Twenty-eight per cent of those with schizophrenia and co-occurring substance abuse were convicted of violent crime, compared to eight per cent of those with schizophrenia and no substance abuse, and five per cent of the general population. "Hence, **the idea that people with schizophrenia are generally more violent than those without is not true,**" says Dr. Niklas L'ngström, one of the researchers behind the study. "People with schizophrenia but no co-occurring substance abuse are insignificantly more violent than people in general."

Dr L'ngström hopes that the results could help alleviate fears about the mentally ill. "The stigmatization of the mentally ill increases their alienation and makes people less likely to seek the help they need from mental health services", he says. "Our results demonstrate once again the importance of preventing, discovering and treating substance misuse in efforts to reduce violent crime."

\* \* \*

**Insurers, national-health administrators, and other gatekeepers to treatment often fail to classify eating disorders as serious mental illnesses, resulting in an ongoing healthcare crisis for sufferers and their families.** The Academy for Eating Disorders (AED) published a paper on this subject in the March 2009 issue of the *International Journal of Eating Disorders*.

Senior Author Edward Tyson, MD, medical director of Cedar Springs Austin Eating Disorder Center, comments: "The position paper is especially important now because patients are being denied insurance coverage in some states, and even in other countries, on the grounds that an eating disorder is not a 'serious mental illness' or is not a 'biologically based mental illness.' Since anorexia, for example, has the highest mortality rate of any psychiatric illness, this is a serious problem," Dr. Tyson said. The position paper points out that the laws in some states, such as New Jersey, actually exclude eating disorders from conditions considered to be serious or biologically based mental illnesses. Dr. Tyson also said that some eating-disorder experts are worried that the ongoing discussion about some type of national health-insurance program for the United States might have similar limitations.

\* \* \*

**Almost 40% of older veterans being treated for late-life depression may, in fact, have an ongoing or recurrent primary diagnosis of posttraumatic stress disorder (PTSD), new research suggests.** Presented at the American Association for Geriatric Psychiatry 2009 Annual Meeting, results from a prospective study by investigators at the

University of Michigan show that 38% of veterans aged 60 years and older had significant PTSD symptoms regardless of their era of service.

"We were surprised by the high prevalence of PTSD symptoms among older veterans. There has been a lot of emphasis on PTSD in returning vets (from current conflicts in Iraq and Afghanistan), but it looks as though perhaps this older population of service members has been left behind," said principal investigator Dr. Helen C. Kales.

\* \* \*

**New research shows a significant proportion of U.S. adolescents with depression go untreated.** Based on a 2007 nationwide survey, a report by the Substance Abuse and Mental Health Services Administration (SAMHSA) shows that adolescents without health insurance were less than half as likely to get treatment as those with Medicaid/Children's Health Insurance Program (CHIP) or private health insurance coverage.

Further, the research shows that 8.2% (two million) youths aged 12 to 17 years have experienced at least one major depressive episode (MDE) in the past year. Only about 40% of these adolescents received treatment, according to the SAMHSA report.

"This report contributes to the growing realization that much more must be done to meet the enormous mental-health needs of our young people," the organization's acting administrator, Eric Broderick, DDS, said in a statement.

The report also found that health insurance coverage is a major determinant of whether adolescents with at least one MDE received treatment within the past year. Among the adolescents, those without health insurance coverage were far less likely to have received treatment (17.2%) than those with Medicaid/CHIP (42.9%) or private health insurance (40.6%).

\* \* \*

**Children who are bullied are more likely to develop psychotic symptoms in early adolescence — and there is a dose effect, with repeated bullying**

**associated with greater risk.** In the first prospective study to examine the relationship between childhood bullying and psychotic symptoms in early adolescence, investigators at the University of Warwick, in Coventry, the United Kingdom, found the risk for psychotic symptoms nearly doubled among children who were victims of bullying at age 8 or 10 years, independent of other psychiatric illness, family adversity, or the child's IQ, and increased nearly four-fold when victimization was chronic or severe.

"If children present with physical or mental health problems, also explore their peer relationships. Being victimized, in particular chronically or severely, can make you ill," said Dr. Wolke, one of the principal investigators. The study is published in the May 2009 issue of *Archives of General Psychiatry*.

\* \* \*

Many more Americans have been using prescription drugs to treat mental illness since 1996, in part because of expanded insurance coverage and greater familiarity with the drugs among primary care doctors, according to U.S. researchers, who claim **73 percent more adults and 50 percent more children are using drugs to treat mental illness than in 1996.**

Among adults over 65, use of so-called psychotropic drugs - which include antidepressants, antipsychotics, and Alzheimer's medicines - doubled between 1996 and 2006. "What we generally find is there has been an increase in access to care for all populations," said Sherry Glied of Columbia University in New York, whose study appears in the journal *Health Affairs*. "Mental health has become much more a part of mainstream medical care."

In 2006, the research team said, 16 percent of adults 65 and older had some form of mental health diagnosis. The study found the number of children diagnosed and treated for mental health

conditions by their primary care doctor doubled between 1996 and 2006.

"The increases in prescription drug use were particularly rapid in the early part of this decade, between 1996 to 2001," Glied said. "For most groups, they have slowed down since then."

One worrisome finding was that there has been little progress in access to care among people with more serious mental illness. They found treatment for older adults with mental limitations who need help dressing, eating, or bathing fell between 1996 and 2006.

\* \* \*

**Vilazodone, the first of a new class of antidepressants known as indolalkylamines, has been shown in a Phase III trial to be effective and well tolerated for the treatment of major depressive disorder, with a rapid onset of effect.** Researchers explained in the March 2009 issue of the *Journal of Clinical Psychiatry* that vilazodone "combines properties of a selective serotonin reuptake inhibitor with 5-hydroxytryptamine-1A partial agonist activity". They add that in addition to offering a rapid antidepressant effect, this agent likely has "a lower risk of sexual dysfunction" than currently available therapies.

Compared to the placebo group, after eight weeks the vilazodone group had greater mean improvements from baseline on the Montgomery-Asberg Depression Rating Scale (MADRS; p = 0.001) and the 17-item Hamilton Rating Scale for Depression (HAM-D-17; p = 0.022). In fact, the researchers note, the treatment group was already demonstrating significant improvements on both scales after just one week.

\* \* \*

**Teenagers whose parents have a high risk of depression are at particularly high risk of becoming depressed themselves.** Now, a large clinical trial has found that a group cognitive behavioral program that teaches coping

and problem-solving skills to such high-risk teenagers can reduce the risk. But, the study also found that the success rate of the prevention program varied greatly depending on the mental health status of the teenagers' parents at the time they began intervention. The program was much more effective than standard care if the parents were also not depressed when the intervention began. The study was published in the *Journal of the American Medical Association*.

\* \* \*

According to a study in *Behavior Research and Therapy*, those with severe, recurrent depression could benefit from therapy that combines mindfulness-based cognitive therapy and traditional therapy. Participants in the study were separated into two groups, those that received only traditional therapy and those that received traditional therapy and mindfulness-based cognitive therapy. Researchers found that **mindfulness-based cognitive therapy reduced the number of patients with major depression**, while it remained the same in the other group.

\* \* \*

In a study published in the *Journal of Affective Disorders*, **the thyroid hormone triiodothyronine (T3) appears helpful as an add-on treatment for people with bipolar II disorder who experience treatment-resistant depression, or for those with bipolar disorder not otherwise specified (NOS) who also have treatment-resistant depression.** Researchers discovered that those with these illnesses had been unsuccessfully treated, on average, with 14 other medications before starting this experimental treatment. Among them, 84% experienced improved symptoms, and one-third experienced full remission. None of the patients experienced a switch into hypomania. Researchers concluded that add-on treatment with triiodothyronine should be considered in cases of treatment-resistant bipolar depression.

# Gearing Up for Los Angeles NAMIWalk for the Mind of America: Secrets to Walk Success

By Mitzi Wright

*This year, Los Angeles NAMIWalk for the Mind of America will be held on Saturday, October 3, 2009. NAMI Westside LA Board Member and Walk Liaison Mitzi Wright has successfully captained teams for the Walk for several years, and has been very successful raising awareness, and funds, for the Walk. In this article, she shares some of her secrets for Walk success.*

\* \* \*

I have had a NAMIWalk team for five years - for every NAMIWalk in LA County - and I am planning now for the 2009 Walk. Since I have had a pretty successful record of organizing teams and raising money for the Walk, I've been asked to share my approach. There are as many different approaches as there are team captains, but perhaps I can provide some useful ideas for other captains.

I have two major goals:

1. The first is to raise money to support all the programs that NAMI provides to the community free of cost. Most NAMI affiliates depend on the proceeds from the Walk for the major part of their funding.
2. The second is raise the awareness in the community of the need for services to treat mental illness, and more importantly, to help eradicate the stigma of mental illness by bringing as many walkers as I possibly can.

For so long, people struggling with mental illness and their families have suffered guilt and shame. One of the most empowering things you can do is to boldly stand up and announce to the world that someone you love has a brain disorder and that it must be treated; they can recover and live satisfying and productive lives.

In my case, I believe the most effective tool for both of these is the letter I send out. If you are new to NAMIWalk, writing your letter may be one of the most difficult things you do. I know people who work as professionals in the mental

health community, yet were extremely reluctant to tell their family, friends, and co-workers that someone in their immediate family had a mental illness.

I have saved all of the letters I have sent out for the past five years. They have evolved, becoming more succinct and short. The most important part of the letter is to share your feelings about how mental illness has affected you and your family, and to be honest. Don't worry about the grammar or punctuation; no one will notice. If anyone would like help writing his/her letter, I would be happy to assist.



Next, send your letter to as many people as you can. I usually send out 60 or more letters. I use my Christmas list, which includes all family members and friends from years ago, my book club list, my office address list, my tennis and golf club list, and my neighborhood address list.

Remember, even if someone cannot donate to you or your team, they can walk in support. My daughter has passed on my letter to her friends, some of whom walk on the team even though they may not have the means to make a contribution.

For the first Walk, I arranged for a class of students taking AP Psychology from University High School to attend. The city provided us with a bus to the Walk at the Santa Fe Dam Recreation Center in Irwindale. Because the Walk was in May, it was easier to make arrangements with a school to get student walkers. Now the Walk is a bit too close to the opening of the school year to set up a team. However, since

some schools require community service, perhaps you could consider contacting a school in your neighborhood.

All team captains can set up their own web page and donations can be made online. This allows you to display your own letter on your personal web site. The use of online solicitation really has opened up the contacts each team captain can reach. I go through my email list and send out my letter and the link to my personal team captain web page. Each year before I set up my web page, I send out an email asking recipients to save that date. I have already done that for October 3, 2009. Here is the link to my web site if you would like to see it: [www.nami.org/namiwalks08/LOS/TheWrightStuff](http://www.nami.org/namiwalks08/LOS/TheWrightStuff)

One thing that has worked very well for me, but not everyone does it, is to include in the letter an envelope with my return address. That way, contributions are returned to me and I know who has donated. Then I send each contributor a personal thank-you letter after the Walk. Be sure to say that the donation is tax deductible and should be made out to NAMIWalk - Los Angeles County.

Last of all, I provide the walkers on my team with our affiliate T-shirts. This may not be something that everyone can afford to do, but it does promote team spirit.

I hope this is helpful. Please contact me if I can be of any help. Now I challenge you to get your team ready and I will see you in Santa Monica on October 3 to walk for the mind of America. GO TEAM!!!

If you would like to see how much fun we had last year at the walk, check out this video: <http://www.youtube.com/watch?v=GndVFfuLC6M>

Also, please join us on July 15 at the regular affiliate speaker meeting when Wayne Baldaro, the Walk Manager, will provide instructions for team captains.

# Things to Remember

## Have Questions or Concerns About This Newsletter?

Please send your questions or concerns about this newsletter to Mindy Glazer at [mglazer@namila.org](mailto:mglazer@namila.org)

For updates on NAMI Westside LA between newsletters, visit our website at [www.namila.org](http://www.namila.org).

Following are the *NAMI Westside LA Newsletter* editors:

- ✓ Erika Cilengir
- ✓ Mindy Glazer
- ✓ Frances Tibbits

## For More Information on Brain Disorders

Visit:

- ✓ [www.nami.org](http://www.nami.org)
- ✓ [www.narsad.org](http://www.narsad.org)
- ✓ [www.mentalhealthjournal.com](http://www.mentalhealthjournal.com)
- ✓ [www.bpdia.com](http://www.bpdia.com)
- ✓ [www.schizophrenia.com](http://www.schizophrenia.com)

## Membership Volunteer Needed

Can you donate some time to help our Membership Chairwoman, Roberta Howard, at her home once a month? The tasks are clerical, mainly involving getting the newsletter in the mail, and if

you can donate a few hours as needed to help out, please contact Roberta at (310) 889-7200, extension 4, with your name, phone number, and days you might be available. The schedule is

flexible, but we need someone reliable to help out. Roberta cannot continue to do this all alone. Thanks!

## Important Contact and Resource Information

**If you have a room to rent in your home or are looking for a roommate and are open to considering a person with a disability, contact the NAMI Westside LA office at (310) 889-7200.**

### NAMI Westside LA Board Members (310) 889-7200

- ✓ Sharon Dunas, MFT, President; Family-to-Family Trainer; Provider Course for Clinicians Coordinator and Teacher; Outreach; and Newsletter Editor
- ✓ Dave Wright, First Vice President and Legal Analyst
- ✓ Lou Goldsmith, Second Vice President and Outreach Committee
- ✓ Janis Frisch, PhD, Outreach Committee
- ✓ Dr. Lynn Brody, Fundraising Committee
- ✓ Roberta Howard, Membership Chair
- ✓ Shelley Hoffman, Treasurer
- ✓ Mitzi Wright, Support Person Leader and Walk Representative
- ✓ Dori Baron, Coordinating Secretary and Walk Representative
- ✓ Stella March, Legislative Advocate
- ✓ Daniella Ledesma, Outreach and Internet Advertising

### General Questions - NAMI Westside LA

- ✓ Sharon Dunas, MFT, (310) 889-7200
- ✓ Roberta Howard, (310) 889-7200
- ✓ Annette Tarsky, (213) 632-0782 (See Annette for referrals to other NAMI affiliates too.)
- ✓ Lea Wall, (310) 306-9494

### Emergency Services and Hotlines

- ✓ Psychiatric Mobile Response Team and access to services information, (800) 854-7771 (**CRISIS LINE**) or (310) 966-6500
- ✓ SMART Team (one police officer and one clinician), provides intervention, referral, and placement for a mentally ill person; to access, call 911.
- ✓ Mental Evaluation Unit (MEU), its mission is to reduce violence during police contact with mentally ill persons and provide such persons with access to mental health services, (213) 485-3375
- ✓ To report an adverse drug reaction, contact the U.S. Food and Drug Administration (FDA) in Washington, D.C. at (888) INFO-FDA or (888) 463-8332, or MedWatch at [www.fda.gov/medwatch/index.html](http://www.fda.gov/medwatch/index.html)
- ✓ Mental Health Helpline (24 hours), (800) 854-7771
- ✓ Hotlines: Suicide Prevention (877) 727-4747, California Youth Crisis (800) 540-4000, Child Abuse (800) 540-4000, Domestic Violence/Sexual Assault (800) 978-3600, and Elder Abuse (800) 992-1660

### Protection and Advocacy

- ✓ For grievance procedures for any disability, call (800) 776-5746 or (916) 488-9955.
- ✓ NAMI Online Advocacy System at [www.nami.org/advocacy](http://www.nami.org/advocacy)
- ✓ Protection and Advocacy, Inc., advocacy information, referrals, and legal help, (916) 488-9955 or [www.pai-ca.org](http://www.pai-ca.org)

### Other Support Groups

- ✓ Daniel's Place, 2701 Ocean Park Blvd, Suite 150A, (310) 392-5855; first break for persons ages 18 to 30; support for families and consumers, including a Parents Support Group on the second and fourth Wednesdays of the month
- ✓ Depression & Bipolar Support Alliance for Consumers, (310) 535-7775
- ✓ SHARE, support groups on all emotional issues, (310) 305-8878
- ✓ Family Advocate, John Griffin, MFT, (213) 637-2311 (with DMH)
- ✓ RECOVERY, INC., self-help cognitive behavioral groups, (310) 306-6766
- ✓ Panic Disorder Support Group, (800) 647-2642
- ✓ UCLA Bipolar Support Group, Monday and Wednesday nights at 6:00 PM, (909) 268-4116, O.C.D groups, (310) 794-7305
- ✓ UCLA Dual Diagnosis Group, Saturday night at 5:00 PM, (310) 206-1148
- ✓ UCLA NPI OCD Group, Last Thursday, 4:30 PM-6:00 PM, Karon Midment, RN, (310) 794-7305

### Community Clinics Offering Treatment and Services

- ✓ Westside Mental Health Center, (310) 966-6500
- ✓ Hollywood Mental Health Center, (323) 769-6100
- ✓ Alcott Center for Mental Health, (310) 785-2121
- ✓ Step Up on Second, (310) 394-6889
- ✓ Daniel's Place, (310) 392-5855
- ✓ Didi Hirsch Mental Health Clinic, (310) 390-6612
- ✓ Jump St., Didi Hirsch, (310) 855-0031
- ✓ San Fernando Valley Mental Health Center, (818) 832-2586

- ✓ Daybreak Day Center, 1614 Ocean Avenue, Santa Monica
- ✓ The Village: Long Beach, (562) 437-6717
- ✓ Exodus Recovery Urgent Care Center in Culver City across from Brotman Medical Center, open 24 hours a day, 7 days a week

#### **Jails and Courts**

- ✓ Mental Health Advocacy Service, (213) 389-2077
- ✓ Protection & Advocacy, (800) 776-5746
- ✓ Mental Health Court Program, after arrest, ask for a DMH person to be in court, (626) 403-4370
- ✓ County Criminal Justice Committee, (213) 974-8398
- ✓ Locating a person in jail, (213) 974-9083

#### **Service Area Advisory Councils (SAACS)**

- ✓ SAAC 4 (Hollywood and West Hollywood); meets at Hollywood Mental Health Center on the third Thursday of each month from 3:00 PM to 5:00 PM, Suzanne Leiss, (323) 851-4709
- ✓ SAAC 5 (Westside, from Beverly Hills to the ocean); meets at different sites on the fourth Tuesday of each month, Celinda Jungheim, Coordinator, (310) 306-6766

#### **Housing**

- ✓ Homes for Life Foundation: Tuesday meetings on housing, Dept. of Mental Health, Carol Leiss, (310) 337-7417
- ✓ Community of Friends: Dept. of Mental Health, (213) 480-0809, ext. 221
- ✓ Homeless Assistance: Dept. of Mental Health, (310) 399-6878 or (213) 632-0782 (Annette Tarsky)
- ✓ Affordable Housing Alternatives, Mrs. Darlest Horn, DMH Housing Coordinator, (310) 358-6089
- ✓ Hospital-to-Home housing assistance, one month's rent, Thomas Olzak, (310) 398-9204
- ✓ Santa Monica House, (310) 345-7736
- ✓ Ruth Teague Supportive, (213) 623-4342
- ✓ SHARE, (877) SHARE-49
- ✓ Family Resource Counseling Center, (310) 479-9789
- ✓ Health Care Insurance Counseling and Advocacy, (800) 434-0222
- ✓ Residential Care Advocacy, 550 S. Vermont, Los Angeles, Royceanne Foster, (213) 738-2712
- ✓ Fair Housing Council of San Fernando Valley, 8134 Van Nuys Blvd, #206, Panorama City, Sharon Kinlaw, (818) 373-1185
- ✓ St. Joseph's Homeless and Housing Division, Cathleen McQuade, (213) 251-6567
- ✓ Housing Board Advisory, Reina Turner, (213) 251-6558
- ✓ Housing Rights Center (people with disabilities), (213) 387-8400, ext. 26
- ✓ Front Door Housing Rights, (310) 659-2913
- ✓ Path Partners (www.pathpartners.org/newsletter/)

#### **Mental Health Residential Centers**

- ✓ Compass House: short-term, (213) 747-8470
- ✓ Twin Tower Treatment Center: North Hollywood, dual diagnosis, (818) 985-0560
- ✓ Alcott Mental Health Center on Robertson: residential and day-care, (310) 785-2121
- ✓ The Manor: residential care and supervision, (310) 450-1748
- ✓ Meadowbrook: locked facility, residential care, (310) 391-8266
- ✓ Vista del Mar: locked facility, counseling, teenagers, (310) 204-1666
- ✓ Portal's House: full range of services, including housing and vocational program, (213) 387-1129
- ✓ Oceanview: Santa Monica housing, board and care, (310) 393-0737
- ✓ Step Up on Second: residential apartments, Santa Monica, (310) 394-6889
- ✓ Jump St.: residential treatment – La Cienega, (310) 855-0031
- ✓ Villa Stanley: at Melrose and Stanley, (323) 937-4856
- ✓ Gateways Residential Center (unlocked facility), Los Angeles
- ✓ Olive Vista (locked), Pomona
- ✓ OPCC Access Center and Safe Haven, 1616 Seventh Street, Santa Monica, (310) 450-4050

#### **Department of Mental Health (DMH) Full Service Partnerships**

- ✓ For older adults (ages 60+), contact Matt Wells at (213) 351-5344.
- ✓ For adults (ages 26-59), contact Sandy Mills, (310) 268-2516.
- ✓ For transitional-age youth (ages 16-26), contact Rachel Melvald at (310) 268-2515 or Paula Binner at (213) 738-2507.
- ✓ For children (ages 6-16), contact Rachel Melvald at (310) 268-2515.
- ✓ For other questions, contact Nikki Dorsey, LCSW, at (310) 268-2514.

#### **Psychiatrists and Psychotherapists**

- ✓ Southern California Psychiatric Society, (310) 815-3650
- ✓ Cedars-Sinai Referral Service, (800) 233-2771
- ✓ UCLA Access Center, (800) 825-9989
- ✓ MEDI-CAL psychiatrists and psychologists, (213) 632-0782
- ✓ Mark S. Kosins, MD, El Monte. Specialty: OCD and Panic Disorder, (626) 307-8420
- ✓ Psychotherapists for Family Members with Mentally Ill Relatives: Sharon Dunas, MFT, (310) 820-4626  
Dr. Michael DiPaolo, (310) 403-7792  
Dr. Janis Frisch, (310) 466-6136

#### **Prescription Assistance**

- ✓ Eli Lilly and Company's prescription assistance program, (877) 795-4559
- ✓ Partnership for Prescription Assistance program, (888) 477-2669 or [www.pparx.org](http://www.pparx.org)
- ✓ Rx Help for Californians ([www.rxhelpforca.org](http://www.rxhelpforca.org))

#### **Other Resources**

- ✓ Conservatorship info, (213) 974-0407
- ✓ PLAN of California, special needs trusts and "proxy parents", Carla Jacobs, (714) 997-3310, (888) 574-1258, or (213) 413-1130
- ✓ Project Return Club for consumers, Jonathan Santos, Westside Regional Aide, (213) 209-0064 (pager); Clubs at Edelman Westside Mental Health Center, Grad House, Alcott Center, and Step Up on Second
- ✓ In Our Own Voice, Stella March, (310) 472-4297 or [smarch@nami.org](mailto:smarch@nami.org)
- ✓ LA Manic Depressive and Depressive Association, (310) 535-7775
- ✓ National Alliance for Borderline Personality Disorder, (914) 835-9011, [www.borderlinepersonalitydisorder.com](http://www.borderlinepersonalitydisorder.com)
- ✓ [www.bpdresourcecenter.org](http://www.bpdresourcecenter.org), (888) 694-2273
- ✓ Obsessive Compulsive Foundation, (203) 878-8889
- ✓ OCD Foundation of California, (818) 990-4830
- ✓ Tourette Syndrome Assn., (800) 639-7462
- ✓ National Education Alliance for Borderline Personality Disorder (NEA BPD), offers a 10-week program called Family Connections for families with children with bipolar or borderline personality disorder, (914) 835-9011 or [neabpd@aol.com](mailto:neabpd@aol.com)
- ✓ West Los Angeles Council for the Disabled, (310) 358-6089. Help with SSI and SSDI, medical insurance billings, subsidized housing (HUD), transit IDs, and reduced energy/telephone rates.
- ✓ SAMHSA's National Mental Health Anti-Stigma Campaign ([www.whatadifference.org](http://www.whatadifference.org))
- ✓ Substance Abuse and Mental Health Services Administration ([www.samhsa.gov](http://www.samhsa.gov))
- ✓ Resource Center to Address Discrimination and Stigma ([www.stopstigma.samhsa.gov](http://www.stopstigma.samhsa.gov))
- ✓ National Institutes of Mental Health ([www.nimh.nih.gov/healthinformation/index.cfm](http://www.nimh.nih.gov/healthinformation/index.cfm))
- ✓ What to do when a friend is depressed ([www.nimh.nih.gov/publicat/friend.cfm](http://www.nimh.nih.gov/publicat/friend.cfm))
- ✓ For information on consumer rights, contact Santa Monica-based Consumer Watchdog at (310) 392-0522 or [www.consumerwatchdog.org/complaints](http://www.consumerwatchdog.org/complaints) or Washington, D.C.-based Public Citizen at (202) 588-1000 or [www.citizen.org/litigation](http://www.citizen.org/litigation)
- ✓ Meals on Wheels West, (310) 394-5133 or [www.mealsonwheelswest.org](http://www.mealsonwheelswest.org)
- ✓ Center for the Assessment of Prevention of Prodromal States (CAPPS) at UCLA. Main line: (310) 206-3466. Director Sandra De Silva, PhD: (310) 206-2866 (direct line) and (310) 425-5381 (private practice)
- ✓ Healthy Families (<http://www.healthyfamilies.ca.gov/hfhome.asp>)



University of Southern California

Research has shown that genes can make some people more likely than others to develop Manic-Depression (Bipolar Disorder) or Schizophrenia. Our team of researchers at the University of Southern California is trying to find these genes. Once these genes are identified, new and improved treatments may be developed.

You may be eligible to take part in this study if you:

- are 18 or older and
- have a diagnosis of Schizophrenia OR
- have a diagnosis of Manic-Depression (Bipolar Disorder)

**All inquiries are strictly confidential**

If eligible, you will be asked to participate in an interview and to give a small blood sample.

**YOU WILL BE PAID FOR YOUR PARTICIPATION.**

Research funded by:  
the National Institute of Mental Health

Approved under USC HSC-IRB protocols HS-08-00313 and HS-08-00435 Feb 24, 2009

Call toll free:

**(866) 689-1443**

Email:

[psych.genetics@usc.edu](mailto:psych.genetics@usc.edu)



# **NAMIWalk is right around the corner.**

Come to our July 15<sup>th</sup> Support Group meeting at the Ed Edelman Westside Mental Health Center, 11080 W. Olympic Blvd., to hear more about the Walk, NAMI's main fundraiser for the year, and how you can participate! It's fun, helps erase stigma, and allows us to bring free support groups and educational programs to the community. For more information, call the NAMI Westside LA Office at (310) 889-7200.

**Refreshments, and a prize  
drawing!**

**See you there!**

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**NAMI Westside LA**



July 2009

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### NAMI Westside LA Application for Membership

Mail this completed application, along with a check or money order, to:

NAMI Westside LA  
Membership  
P.O. Box 491216  
Los Angeles, CA 90049

Note that your membership in NAMI Westside LA includes membership in NAMI California and NAMI National.  
For more information, call (310) 889-7200.

<b>Membership</b>	<input type="checkbox"/> Family - \$50
	<input type="checkbox"/> Individual - \$45
	<input type="checkbox"/> Low-Income Membership (individual on SSI or SSDI) - \$1
	<input type="checkbox"/> <i>NAMI Westside LA Newsletter Only</i> - \$20

<b>Donation</b>	<input type="checkbox"/> \$100	<input type="checkbox"/> \$50
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